

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Sheriff Herbie Johnson
AUTAUGA METRO JAIL
136 North Court Street
Prattville, AL 36067

08CV243

2. Article Number

(Transfer from service label)

7007 2680 0003 1841 6780

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-1

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Barbara G. Rhodes*☐ Agent☐ Addressee

B. Received by (Printed Name)

BARBARA G. Rhodes

C. Date of Delivery

4-7-08

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

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1. Article Addressed to:

Nurse Paula
AUTAUGA METRO JAIL
136 North Court Street
Prattville, AL 36067

08CV243

2. Article Number

(Transfer from service label)

7007 2680 0003 1841 6797

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Barbara G. Rhodes*☐ Agent☐ Addressee

B. Received by (Printed Name)

BARBARA G. Rhodes

C. Date of Delivery

4-7-08

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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1. Article Addressed to:

CO Mattew
AUTAUGA METRO JAIL
136 North Court Street
Prattville, AL 36067

08cu243

2. Article Number

(Transfer from service label)

7007 2680 0003 1841 6803

PS Form 3811, February 2004

Domestic Return Receipt

102595-01

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Barbara G. Rhodes*☐ Agent☒ Addressee

B. Received by (Printed Name)

Barbara G. Rhodes

C. Date of Delivery

*4-7-08*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

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- Print your name and address on the reverse so that we can return the card to you.
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1. Article Addressed to:

CO Newcomb
AUTAUGA METRO JAIL
136 North Court Street
Prattville, AL 36067

08cu243

2. Article Number

(Transfer from service label)

7007 2680 0003 1841 6087

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Barbara G. Rhodes*☐ Agent☒ Addressee

B. Received by (Printed Name)

Barbara G. Rhodes

C. Date of Delivery

*4-7-08*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes